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Column 1) Column 2) SMALL ENTITY OR SI	☐ To be Mailed
BASIC FEE N/A	THER THAN MALL ENTITY
) FEE (\$)
OZ CER 1 (6(6), (1) (c (m)) V/A N/A	
27 CFR 1.16(ii)	
G7 CFR 1.16(n) minus =	
APPLICATION SIZE FEE (37 CFR 1.18(e)) sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each daddtional 50 sheets or fraction thereof. See	
35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))	
* If the difference in column 1 is less than zero, enter "0" in column 2. TOTAL TOTAL	L
(Column 1) (Column 2) (Column 3) SMALL ENTITY OR SM	HER THAN MALL ENTITY
O6/15/2011 Calmis REMAINING RATE (8) ADDITIONAL RATE (8) FEE (8) Calmis RATE (9)	ADDITIONAL FEE (\$)
Total (37 CFR - 20 Minus = 15 = 5 X s = OR X \$52=	260
Independent 1	0
Application Size Fee (37 CFR 1.16(s))	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16@)	
TOTAL TOTAL ADD'L OR ADD'L FEE FEE	260
(Column 1) (Column 2) (Column 3)	
CLAMS HIGHEST REMAINING NUMBER PRESENT RATE (\$) ADDITIONAL RATE (\$) AMENDMENT PAID FOR EXTRA AMENDMENT PAID FOR	ADDITIONAL FEE (\$)
Total (37 CFR	
Independent	
Total (27 CPT Total (27 CP	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(ij)) OR	
* If the entry in column 1 is less than the entry in column 2, write '0' in column 3. "If the '15 the entry in column 1 is less than the entry in column 2, write '0' in column 3. "If the '15 the '	

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Kniff Information, U.S. Patent and Trademark Office, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.